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3-31-05

UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>	Attorney Docket No.	03500.011761.1
	First Named Inventor or Application Identifier	
	YUTAKA MURAKAMI	
	Express Mail Label No.	

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>		ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	<div>031088 U.S. PTO 10/677279</div>  <div>100303</div>
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)	
3. <input checked="" type="checkbox"/> Specification Total Pages <input type="text" value="44"/>	a. <input type="checkbox"/> Computer Readable Form (CRF)	
4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) Total Sheets <input type="text" value="9"/>	b. Specification Sequence Listing on:	
5. <input checked="" type="checkbox"/> Oath or Declaration Total Pages <input type="text" value="3"/>	i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or	
a. <input type="checkbox"/> Newly executed (original or copy)	ii. <input type="checkbox"/> paper	
b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed)	c. <input type="checkbox"/> Statements verifying identity of above copies	
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).		
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		
ACCOMPANYING APPLICATION PARTS		
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))		
10. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney		
11. <input type="checkbox"/> English Translation Document (if applicable)		
12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations		
13. <input checked="" type="checkbox"/> Preliminary Amendment		
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)		
15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)		
16. <input checked="" type="checkbox"/> Other: <u>Claim to Priority; Letter Transmitting Corrected Formal Drawing with one (1) sheet of drawings</u>		

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

<input type="checkbox"/> Continuation	<input checked="" type="checkbox"/> Divisional	<input type="checkbox"/> Continuation-in-part (CIP) of prior application No. <u>08/736,245</u> filed <u>October 24, 1996</u>
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Prior application information: Examiner Gabriel I. Garcia Group/Art Unit: 2624

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS				
<input checked="" type="checkbox"/> Customer Number or Bar Code Label	05514 (Insert Customer No. or Attach bar code label here)		or <input type="checkbox"/> Correspondence address below	
NAME				
Address				
City	State	Zip Code		
Country	Telephone	Fax		



CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	1-20 =	0	X \$ 18.00 =	\$ 0.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	1-3 =	0	X \$ 84.00 =	\$ 0.00
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))			\$280.00 =	\$ 0.00
				BASIC FEE (37 CFR 1.16(a))	\$770.00
			Total of above Calculations =		\$770.00
	Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).				
	TOTAL =				\$770.00

19. Small entity status

- a. ☐ A small entity statement is enclosed
- b. ☐ A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.
- c. ☐ Is no longer claimed.


20. ☒ A check in the amount of \$ 770.00 to cover the filing fee is enclosed.

21. ☐ A check in the amount of \$ to cover the recordal fee is enclosed.

22. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 06-1205:

- a. ☒ Fees required under 37 CFR 1.16.
- b. ☒ Fees required under 37 CFR 1.17.
- c. ☐ Fees required under 37 CFR 1.18.

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED	
NAME	Mark A. Williamson - Registration No. 33,628
SIGNATURE	
DATE	October 3, 2003

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